CITY OF LOWELL DIVISION OF PLANNING AND DEVELOPMENT

LEAD HAZARD CONTROL PROGRAM APPLICATION

SINGLE & MULTI-FAMILY RESIDENCE - INVESTOR

Property Address:	
Name of person responsible for submitting this application:	
Telephone:	
Cell Phone: Please check the box for the best method to contact you	

Some Important Notes:

- All tenants 18 years and older must provide verification of income. Occupants must be income eligible to receive a Grant or loan. Vacant units already qualify.
- Properties that have a child with an elevated blood lead level or occupied by a child under 6 years old are Program priorities and may be assisted before a property without
- You must own the property to apply for a Lead Program Grant or loan
- Please inform us if you have a second mortgage on your property or if there is a lien on the property
- PLEASE INFORM US IF THE HOME IS OWNED IN A FAMILY OR REALTY TRUST some of our programs do not allow assistance for property in a family or realty trust.
- If more than 50% of the residence is used as a daycare, it is not eligible.
- Please DO NOT contact any lead paint inspectors or deleaders. The Program will assist you with this.
- All tenants must fill out and return the tenant packet.

Main Number: 978-446-7200

X 1442

X 1438

RENTING TO LOWER INCOME TENANTS GRANT GUIDELINES

Single-family properties:

Tenants' annual household income must not exceed 80% of area median income (AMI)

Multi-family properties:

One half of the units must be rented to tenants whose income does not exceed 50% AMI

The remaining units must be rented to tenant's whose income does not exceed 80% AMI

If the property has 5 or more units, 20% of the units may be rented to tenant's whose income exceeds 80% AMI Examples:

4 unit building – 2 units with tenants at or below 50% AMI, 2 units with tenant's at or below 80% AMI

8 unit property - 4 units with tenants at or below 50% AMI, 2 units with tenant's at or below 80% AMI & 2 units at any income

Area Median Income (AMI) Chart

Tired inculari income (7 tim) Gridit			
Family Size	50%	80%	
1	\$30,950	\$44,800	
2	\$35,350	\$51,200	
3	\$39,800	\$57,600	
4	<mark>\$44,200</mark>	\$64,000	
5	<mark>\$47,750</mark>	\$69,100	
6	<mark>\$51,250</mark>	\$74,250	
7	<mark>\$54,800</mark>	\$79,350	
8	<mark>\$58,350</mark>	\$84,500	

Effective date 4/2009

RENTING TO HIGHER INCOME TENANTS MASSHOUSING GET THE LEAD OUT LOAN PROGRAM GUIDELINES AVAILABLE FOR 1-4 UNIT PROPERTIES

INCOME LIMITS:

Household size Income Limits (These limits are for Lowell only-other communities may vary)

1-2 persons \$70,700.00 3 or more \$81,300.00

LOAN LIMITS

Single-family \$30,000.00 Three-family \$40,000.00 Two-family \$35,000.00 Four-family \$45,000.00

INTEREST RATE AND LOAN TERMS:

- 5% interest- principal and interest paid monthly until the loan is fully retired
- There is no penalty for early pay off
- Length of repayment varies with loan amount
- Maximum debt (including GTLO Loan) to income rate is 50% of gross income

LOAN FEES

All MassHousing Loans involve the following fees (subject to change):

Inspection Fees (if applicable)
 Bank Fee
 MassHousing Fee
 Amount will vary
 \$ 421.00
 \$ 150.00

4. LRA Fee (4.5% of the deleading cost) \$200 minimum, \$1,000 maximum

THE MASSACHUSETTS DELEADING TAX CREDIT:

Upon receiving a Letter of Full Deleading Compliance, you will be eligible to receive a Massachusetts State tax credit of up to \$1,500.00 per unit. This credit may be applied against your state tax liability for up to seven years after deleading. For further information, call the Massachusetts Department of Revenue at (800) 392-6089 or visit their web site at www.Massdor.com for a copy of the Schedule LP.

Lead Paint Program Application-City of Lowell

Revised: 4/12/2010

Instructions for Filling Out Application

2.	Submit the following documents with your application. We CANNOT process your application until we receive ALL of the required information. The following is a checklist for your convenience:		
	Copy of Deed (may be available online – please check with program staff)		
	Proof of Residency - Acceptable Documentation: Vehicle Registration, Utility Bill or Confirmation from the Post Office Copy of current Insurance Policy (Declaration Page) and proof of payment		
	Recent Mortgage Statement(s) with proof of payment		
	Settlement sheet if recent home purchase		
	Signed copies of the last 2 years tax returns		
	Four (4) recent, consecutive pay stubs from <u>each</u> employment source for all working adults		
	Recent statement of income amount from any other sources, including Rental income (Examples: pension check, social security, court ordered alimony, etc.)		
3.	Tenant Packets must be completed and submitted with application for each unit.		
De	pending on the type of assistance you qualify for, additional documents may be required.		

If you wish to participate in our program, once the application has started, do not take out a second mortgage on the property or a loan that puts a lien on the property.

INFORMATION FOR GOVERNMENT MONITORING PURPOSES		
The following information is requested by the Federal Government in order to monitor compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information, but are encouraged to do so. The law provides that an agency may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations this agency is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the above information, please check the box below.		
\square I do not wish to furnish this information		
Race/National Origin: ☐ American Indian, Alaskan Native ☐ Asian, Pacific Islander ☐ Black ☐ Hispanic ☐ White ☐ Other (specify)		
Sex: ☐ Female ☐ Male		
Female Head of Household: ☐ Yes ☐ No		

1. Please fill in each section completely

PART ONE Property Information

Property Information			
How did you hear of this progra	am?		
Address of property to be delea	ded:		
List each person on the deed	1 below		
Owner Name	Social Security Number	Home Address	Contact Number
Type of property (check one): [Single Family Two Fami	ly Three Family Four Family	amily Other
Year the Property was built:	Date of Purchas	se: Purchase I	Price \$
Please list below any mortgage	(s) on the property. <i>If none indice</i>	ate NONE.	
		\$	
Mortgage Company name		Monthly Paymer	nt
		\$	
2 nd Mortgage Company name		Monthly Payme	nt
Are your real estate taxes paid	through your mortgage? Yes	No 🗖	
Are your real estate taxes and C	City bills up to date? Yes \(\bigcap \)	No 🗖	
Did you receive any type of Do	own Payment Assistance when yo	u purchased your home? Yes	No 🗖
If yes, what program:			<u> </u>
Are there any liens against the	property? Yes		
If yes, explain:			
	nd by the City or the Childhood I	ead Paint Prevention Program?	Yes No
ii yes, expiaiii:			<u> </u>
Are there children under 6 that	live or visit the property: Yes	No 🗖	
Please list below, any additiona	l property you may own:		

PART TWO PROGRAM INFORMATION/AGREEMENT

All personal information you provide will be used solely to determine eligibility in this program and/or reporting purposes and will be kept strictly confidential.

Please read the following terms carefully. By signing this application you agree to all of the following:

ONCE THE LEAD INSPECTION HAS BEEN PERFORMED, ONLY LICENSED DELEADERS CAN ADDRESS THE LEAD HAZARDS. It is illegal for unauthorized individuals to remove, scrape or replace lead hazards. (This includes remolding, or replacing broken windows)

Program Requirements:

If the property qualifies, a Massachusetts Licensed Lead Inspector will do a lead inspection at your property. If there are any lead hazards identified, a Massachusetts Licensed De-leader will perform all deleading work. This work will result in a Letter of Full Deleading Compliance.

A code inspection will be performed. It is your responsibility to correct any violations. We may refer you to other programs to assist you with code violations.

All municipal fees must be paid up-to date (water, sewer, trash, recycle fees, etc.)

If you qualify for a GRANT, your property will be restricted for at least three (3) years as affordable housing.

If you are given a LOAN, a mortgage will be placed on your property and you must pay back the loan according to the terms of a Promissory Note.

A credit report for each owner may be obtained from a credit-reporting agency.

An escrow account will be set-up in both your name and the Contractor's for the purpose of paying the contractor. You must be available to sign the check within 24 hours. All payments will be made through this office.

You hereby grant permission to the City of Lowell's Lead Hazard Control Program to obtain any further information necessary to determine your eligibility for a Lead Paint Abatement Loan. This information may be obtained from any source named in this application.

Properties that have a child with an elevated blood lead level or a child under the age of 6 may be assisted before a property without.

Relocation during deleading work:

Massachusetts State Law requires temporary relocation while deleading work is being done in a unit. During the time that the deleaders are working inside your home, your family will have to temporarily move out. The average time is 14 working days. The exact time depends on the size of the unit and/or how much deleading must be done. You cannot go in and out of your home during this time. You cannot move back in until you have been notified that the work is done and it is safe. To make sure your unit is safe the lead inspector will take dust wipe samples throughout your home. A laboratory will test the wipes samples. Relocation is required under Massachusetts State Law so that no member of your family will be exposed to lead dust during deleading. It is advised that during deleading you temporarily relocate with family or friends.

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Preparing your unit for deleading:

You are responsible to pack and store your belongings. Attached are detailed instructions on how to prepare your unit. Basically all items must be off the walls, curtains/shades removed, decorations, pictures, breakables all put away. All closets should be emptied. Clothing can stay on hangers; lay them on top of beds. Move furniture to the middle of the room (pile things on top of each other if needed. Everything will be wrapped in plastic and sealed. We recommend taking valuable items out of the unit during lead abatement.

Non-Liability of personal injury/damage:

I will indemnify and hold the City of Lowell, Division of Planning and Development's Lead Hazard Control Program and its officials harmless against any claims for injury or damage of any kind to persons or property occurring or arising during this program.

By signing this application you attest that the information contained herein is true and complete to the best of your knowledge and belief, you agree to the terms of the program and understand that submission of this application does not guarantee you will receive assistance.

X	X	
Signature of Owner	Signature of Co-Owner	
Date:		

WARNING: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.

Instructions to Drepare Your Home for Deleading

YOU MAY NOT REMAIN IN YOUR UNIT DURING DELEADING – IT IS AGAINST THE LAW. IF YOUR UNIT IS NOT PREPARED ACCORDING TO THE FOLLOWING, THE PROJECT WILL BE CANCELLED AND FUNDING WILL BE WITHDRAWN OR <u>YOU MAY PAY</u> THE CONTRACTOR (IN ADVANCE) \$250.00 PER DAY FOR DELAYS UNTIL PROPER PREPARATION HAS BEEN DONE. INVESTORS AND OWNERS OF MULT-FAMILY HOMES, YOU ARE RESPONSIBLE FOR MAKING SURE YOUR TENANTS COMPLY WITH THESE INSTRUCTIONS.

PLEASE FOLLOW THESE STEPS TO PREPARE YOUR UNIT FOR DELEADING

PLEASE REMOVE and TAKE WITH YOU ALL VALUABLES AND/OR HAZARDOUS ITEMS (Examples: jewelry, cash, firearms, etc.)

ALL PERSONAL ITEMS and MOVABLE OBJECTS must be PACKED and STORED, or removed. When possible, you should remove your belongings and temporarily store them elsewhere. (Examples: food, dishes, pots, pans, curtains, draperies, window blinds, window shades, wall hangings, area rugs, toys and clothing)

If there is a room(s) that is not being deleaded, please check with the Technician from the Lead Abatement Program if you can store items in that room.

ALL breakable items, such as "knick knacks" and glassware, should be removed from cabinets or shelves and packed in order to avoid breakage or other damage.

ALL furniture and packed items must be moved to the center of the room, or removed. For example, move the bed to the center of the room. Empty clothing and other items from your closet and pile them on to the bed.

ALL furniture and packed items must be removed from rooms where floors will be deleaded.

Your belongings will be sealed with plastic and duct tape to prevent contamination.

EVERY EFFORT SHOULD BE MADE TO ENSURE THAT YOUR BELONGINGS ARE STORED COMPACTLY. Lead abatement contractors need to have enough room to do their work!

ALL FOOD MUST BE REMOVED FROM THE CABINETS and MUST BE REMOVED FROM THE REFRIGERATOR AND REMOVED FROM THE PREMISES.

PETS MUST BE BOARDED OR SOME ARRANGEMENTS MADE FOR THEIR CARE AWAY FROM YOUR UNIT – THIS INCLUDES AQUARIUMS, FISH BOWLS, HAMPSTERS, ETC.

If gas to appliances needs to be shut off, it must be done by you and it must be turned on by you. If contractor has to do this he/she will not be responsible for any damages or problems that may be incurred.

Attached is YOUR COPY of these terms.

Please sign below to indicate you have received these instructions.		
X		
SIGNATURE	DATE	

OWNER'S COPY – PLEASE KEEP PROGRAM INFORMATION/AGREEMENT

All personal information you provide will be used solely to determine eligibility in this program and/or reporting purposes and will be kept strictly <u>confidential.</u>

Please read the following terms carefully.

**ONCE THE LEAD INSPECTION HAS BEEN PERFORMED, <u>ONLY</u> LICENSED DELEADERS CAN ADDRESS THE LEAD HAZARDS. It is illegal for unauthorized individuals to remove, scrape or replace lead hazards. (This includes remolding, or replacing broken windows) **

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Preparing your unit for deleading:

You are responsible for packing and storing your belongings in any room that will be receiving deleading. Attached are the detailed instructions on how to prepare your home.

Non-Liability of personal injury/damage:

I will indemnify and hold the City of Lowell, Division of Planning and Development's Lead Paint Abatement Program and its officials harmless against any claims for injury or damage of any kind to persons or property occurring or arising during this program.

By signing this application you: Attest that the information contained herein is true and complete to the best of my/our knowledge and belief; Agree to the terms of the program; acknowledge that you have been given the lead safe pamphlet, "Protect Your Family from Lead in your Home"; and that submission of this application does not guarantee you will receive assistance.

Leave Blank-your copy to keep	Leave Blank	
Signature of Owner	Signature of Owner	
Date:		

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